24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Keep Conservatives United	C C00499525
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee Impact Strategies, Inc.	Date of Public Distribution/Dissemination
	05 / 01 / 2014
Mailing Address PO Box 18165	Amount
City State Zip Code	10100.00
Raleigh NC 27619	Transaction ID : SE.4307 Date of Disbursement or Obligation
Purpose of Expenditure TV Advertising Media Buy Category/ Type	04 / 29 / 2014
Name of Federal Candidate Support Office	ce Sought: X House District: 06
BRUCE DOUGLAS VONCANNON Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disk 2014	bursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
	Allouit
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Type Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	bursement For: Primary General
Ter Election for elinee estagnit	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	10100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10100.00
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
24.0	05 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	